

January 29, 2007

Los Angeles County **Board of Supervisors**

> Gloria Molina First District

TO: Each Supervisor

Yvonne B. Burke Second District

Bruce A. Chernof, M.D.

Director and Chief Medical Officer

Zev Yaroslavsky Third District

> Don Knabe Fourth District

SUBJECT:

FROM:

GRADUATE MEDICAL EDUCATION QUARTERLY REPORT

FOURTH CALENDAR QUARTER (OCT - DEC) 2006

Michael D. Antonovich Fifth District

The Graduate Medical Education (GME) Quarterly Report for the fourth calendar quarter of 2006 is attached. Information in the following categories is regularly complied and reviewed by the Office of Clinical Affairs and Affiliations for all Los Angeles County sponsored or co-sponsored residency training programs. Information in the attached reports reflect the following:

Bruce A. Chernof, MD Director and Chief Medical Officer

> John R. Cochran III Chief Deputy Director

Robert G. Splawn, MD Senior Medical Director I. Total Housestaff Numbers by Facility (Attachment I)

Total: 1,707 (2006-2007) LAC+USC 917

Harbor-UCLA 462 **KDMC** 245 **OVMC** 83

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012 King/Drew Medical Center (KDMC)

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www.ladhs.org

On November 1, 2006, the Charles R. Drew University of Medicine and Science notified the Accreditation Council for Graduate Medical Education (ACGME) of its decision to "voluntarily withdraw" from its role as the primary institutional sponsor and to close all fifteen (15) ACGME-accredited residency programs at KDMC, effective July 1, 2007. The University's action was due to the medical center's loss of certification from the Centers for Medicare and Medicaid Services (CMS).

To improve health through leadership, service and education.

The ACGME approved the University's plan to place approximately two hundred thirty-three (233) KDMC residents into educational rotations at twenty three (23) other institutions to allow each resident to continue training for the remainder of the 2006-07 academic year. Approximately seventy two (72) residents and fellows will complete training and graduate by June 30, 2007. Eight (8) residents who are "off-cycle" will complete their training between July 28 and November 1, 2007. The remaining one hundred sixty-nine (169) residents, including eight (8) who were pre-matched, must be placed in training programs at other sponsoring institutions. In accordance with ACGME requirements, in the event of program closure, the primary sponsor, in this case Drew University, is responsible for the placement of its residents.



The County is the primary sponsor for the General Dentistry and the Oral and Maxillofacial Surgery programs at KDMC. Both programs are accredited by the American Dental Association. There are twelve (12) interns and residents in these programs. In mid November, 2006, the program director issued a letter of intent to the Commission on Dental Accreditation (CDA) to transfer sponsorship of both programs to Harbor-UCLA Medical Center. The CDA is expected to render a decision in early February, 2007.

II. Teaching Institution and Training Program Accreditation Status (Attachment I)

No change since the last quarter.

III. Medical Specialty/Subspecialty Board Certification Results (Attachment II)

Medical specialty/subspecialty board certification results for residents and fellows who completed County training programs from 2003 through 2005 are presented in this report. The next verification of status will occur in March, 2007, and will include a final update of certification achievement results for 2003, updated results for 2004 and 2005, and incorporate new results for four hundred ninety-nine (499) housestaff who completed training in 2006.

IV. Facility Compliance with Resident Supervision Guidelines (Attachment III)

Fiscal Year 2005-06, Fourth Quarter:

Compliance with resident supervision indicators reflect continued improvement however, opportunities for improvement continue to exist. Re-audits have been conducted to more closely monitor compliance. Facilities that demonstrate best performance and/or a greater than fifteen percent (15%) improvement receive cash awards for their Quality Patient Care Funds, or equivalent, to be used for the purchase of equipment for patient care.

If you have any questions or need additional information, please let me know.

BAC:pd 506:015

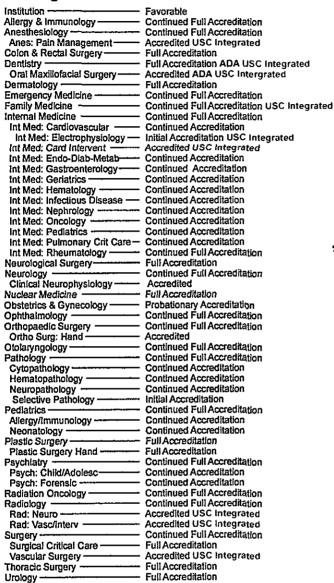
Attachments

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

Los Angeles County Graduate Medical Education Programs, Accreditation Status and Housestaff Totals



Program Status



King/Drew Medical Center

Through July 1, 2007

Program Status

•	
Institution	Continued Accreditation
Anesthesiology	Full Accreditation
Dematology	 Continued Full Accreditation
	Continued Full Accreditation
Family Medicine —	
General Dentistry ————	 Full Accreditation ADA
Oral Maxillofacial Surgery	
Internal Medicine	 Full Accreditation
Int Med: Endocrinology ——	Accredited
Int Med: Gastroenterology —	
Int Med: Infectious Disease -	— Accredited
Int Med: Geriatrics Medicine	 Continued Accreditation
Obstetrics & Gynecology —	 Full Accreditation
Ophthalmology —	 Continued Full Accreditation
Orthopaedic Surgery ———	 Continued Probation
Otolaryngology	 Full Accreditation
Pediatrics ————	 Continued Full Accreditation
Psychiatry ————	 Continued Full Accreditation

2006-2007 LAC+USC 54% (917) Housestaff Total 1,707 Housestaff Total 1,707 Contemporated King/Drew 14% (245) Through July 1, 2007

Olive View-UCLA Medical Center

C4-4--

Program	อเลเนร
Institution ————	Not Required
Internal Medicine	Continued Full Accreditation
Int Med & Emergency Med	Continued Full Accreditation
Int Med: Heme-Oncology	Continued Full Accreditation
Int Med: Nephrology	Continued Full Accreditation
Int Med: Rheumatology	Continued Accreditation

*UCLA employed housestaff = 83 (County-sponsored, UCLA-employed)

Harbor-UCLA Medical Center

Program	Status
Institution Anesthesiology Emergency Medicine Emerg: Ultrasound	Favorable
Anesthesiology ————	Continued Full Accreditation
Emergency Medicine	Continued Full Accreditation
Emerg: Ultrasound	Accredited
Emerg: Sports Medicine ————————————————————————————————————	Accredited
	Continued Full Accreditation
Family Med-Sports Med	Accredited
Internal Medicine	Continued Full Accreditation
Int Med: Cardiovascular	Continued Accreditation
Int Med: Card-electro	Continued Accreditation
Int Med: Card-Intervent	Accredited
Int Med: Dermatology ————	Provisional Accreditation
Int Med: Endocrinology ———	Continued Accreditation
Int Med: Heme-Oncology	Continued Accreditation
Int Med: Infectious Disease	Continued Accreditation
Int Med: Nephrology ————	Continued Accreditation
Int Med: Pulmonary Crit Care —	Accredited
Int Med: Rheumatology ———	Accredited UCLA Integrated
Neurology ————	Continued Full Accreditation
Neuro: Child	Continued Accreditation w/Warning
Neuro: Neurophysiology ———	Continued Accreditation w/Warning
Obstetrics & Gynecology	Continued Full Accreditation
Matemal/Fetal	Accredited
GTN UIDIOGY — · ·	Accredited
Orthopaedic Surgery	Continued Full Accreditation
Ortho Foot & Ankle	Accredited
Pathology	Continued Full Accreditation
Path: Surgical	Accredited
Pediatrics —	Continued Full Accreditation Continued Accreditation
Peds: Critical Care	Continued Accreditation
	Continued Accreditation
Peds: Endocrinology	Continued Accreditation
Peds: Infectious Disease Peds: Neonatal	Continued Accreditation w/Warning
	Continued Full Accreditation
Psychiatry ————————————————————————————————————	Continued Full Accreditation
Radiology	Continued Full Accreditation
Pad: Rody Imaging	Accredited
Rad: Body Imaging Rad: Neuro	Continued Accreditation
Rad: Nuclear	Accredited
Rad: Vasc/Interv	Continued Accreditation
Surgery —	Full Accreditation
Surg: Vascular	
Transitional Year	Continued Accreditation Continued Full Accreditation
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Glossary of Program Accreditation Status

Accredited

Subspecialties only - A Review Committee confers the status of "Accredited" when the dependent subspecialty program has demonstrated substantial compliance with program requirements.

Accreditation with Warning

Subspecialties only - A Review Committee may grant "Accreditation with Warning" when the dependent subspecialty has been found to have one or more area of non-compliance with program requirements that are of sufficient substance to require prompt correction.

Continued Full Accreditation

"Continued Full Accreditation" status is conferred when a Review Committee determines that a program continues to demonstrate substantial compliance with program requirements.

Favorable

"Favorable" status is conferred when a Review Committee determines that the institution is in substantial compliance with the essential components of Graduate Medical Education.

Full Accreditation

A Review Committee grants "Full Accreditation" when a program holding provisional accreditation or probationary accreditation demonstrates substantial improvement and/or compliance with program requirements.

Initial Accreditation

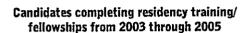
"Initial Accreditation" is conferred when a Review Committee determines that a proposal for a new program substantially complies with all program requirements.

Probationary Accreditation

"Probationary Accreditation" is conferred when the Review Committee determines that a program has failed to demonstrate substantial compliance with program requirements.

Provisional Accreditation

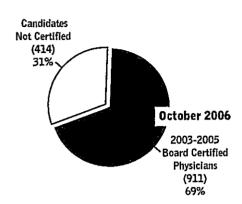
New programs go through a period of "Provisional Accreditation" which implies that a program is in the developmental stage. Provisional Accreditation can be conferred when a program's accreditation was withdrawn and the program has applied to become newly accredited.



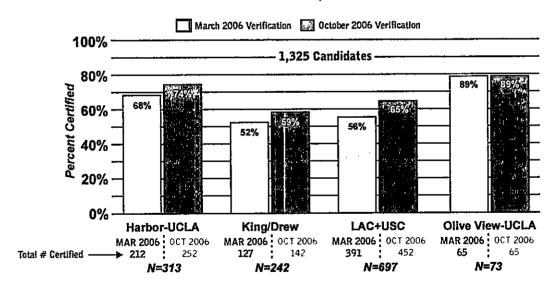
Candidate Total = 1,325

Attachment II

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Page 4	King/Drew Medical Center — 242
Page 4	Olive View-UCLA Medical Center - 73



2003-2005 Summary Board Certification Verification Results by Facility As of October, 2006



NOTE:

The next verification report, to occur in March 2007, will depict the final certification results for 2003, update results for 2004 and 2005, and incorporate candidates who most recently completed residency and fellowship training in 2006.

Certification Types- General (G), Subspecialty (S)
No Candidates

LAC+USC Medical Center

nnac=111	2003			2004				2005		INITIAL
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Allergy & Immunology (G)	2	2	100%	1	1.5		2	2	100%	No Limit
Anesthesiology (G)	14	11	79%	11	3	27%	15	4	27%	12 Years
Pain Management (S)	, """		1			•	1	11	100%	
Colorectal Surgery (G)	3	2	67%	2	2	100%	3	0	0%	5 Years
Dermatology (G)	2	2	100%_	3	3	100%	2	2	100%	No Limit_
Emergency Medicine (G)	17	16	94%	18	16	89%	18	7	39%	No Limit
Internal Medicine (G)	50	46	92%	50	48	96%	54	46	85%	No Limit
Cardiovascular Disease (S)	4	3	75%	4	4	100%	4	2	50%	
Endocrinology (S)	3	3	100%	2	2	100%	3	2	67%	
Gastroenterology (S)	2	2	100%	4	4	100%	5	2	40%	
Geriatric Medicine (S)	1	1	100%				2	1	50%	
Hematology & Med Onc (S)	4	4	100%	3	3	100%	3	2	67%	
Infectious Disease (S)	1	1	100%	1	1	100%	2	2	100%	
Nephrology (S)	2	2	100%	4	4	100%	4	4	100%	
Pulmonary & Critical Care (S)	5	4	80%	5	5	100%	4	3	75%	
Rheumatology (S)	2	2	100%	2	2	100%	3	2	67%	
Nuclear Medicine (G)							1	0	0%	No Limit
Neurology (G)	2	2	100%	6	2	33%	5	Ō	0%	No Limit
Neurological Surgery (G)	2	0	0%				2	0	0%	5 Years
Obstetrics & Gynecology (G)	11	7	64%	12	0	0%	12	ō	0%	No Limit
Female Pelvic Medicine (S)			- 0.70 -				1	0	0%	
Gynecologic Oncology (S)	1	1	100%							
Maternal-Fetal Medicine (S)	1	ī	100%							
Repro Endocrin & Infertility (S)	1	1	100%	1	0	0%	1	0	0%	
Ophthalmology (G)	4	3	75%	5	2	40%	6	ō	0%	No Limit
Orthopedic Surgery (G)	9	ī	11%	11	0	0%	10	0	0%	No Limit
Ortho Hand Surgery (S)	2	2	100%	i	1	100%	1	0	0%	
Otolaryngology (G)	4	4	100%	4	4	100%	4	3	75%	No Limit
Pathology (G)	4	4	100%	4	4	100%	6	6	100%	5 Years
Cytopathology (S)	4	3	75%	3	2	67%	4	3	75%_	
Hematopathology (S)	3	3	100%	1	i	100%	2	ő	0%	
Neuropathology (S)			10076	-		10070	1	1	100%	
Surgical Pathology (S)	2	1	50%	<u> </u>	 		7	Ô	0%	
Pediatrics (G)	8	7	87%	9	8	89%	14	12	86%	No Limit
	13	6	46%	11	2	18%	5	4	80%	110 21111
Internal Med Peds (S) Neonatal-Perinatal (S)	1	1	100%	4	3	75%	2	1	50%	
	3	3	100%	3	1	33%	2	ō	0%	2 Years
Plastic Surgery (G)	7	3	43%	7	2	29%	9	0	0%	No Limit
Psychiatry (G)	6	3	50%	4	1	25%	8	0	0%	110 211.110
Child/Adolescent Psychiatry (S)	3 -	1	33%	2	Ô	0%	3	0	0%	
Forensic Psychiatry (S)	11	11	100%	10	9	90%	9	9	100%	No Limit
Radiology (G)			100%	 -	7	7076	1	0	0%	NO Elline
Neuroradiology (S)			100%	2	2	100%	1	1	100%	
Radiation Oncology (G)	1 (1		2	2	100%	8	5	62%	3 Years
Surgery (G)	6	5	83%		- 6	0%	2	2	100%	, ieais
Surgical Critical Care (S)	1	1	100%	1	<u> </u>	0%	1	0	0%	
Vascular Surgery (G)	 		 	 	 			1	100%	5 Years
Thoracic Surgery (G)			/==-	1	 	220/	1 2		0%	5 Years
Urology (G)	3	2	67%	3	1	33%	3	0	·1	5 Years
TOTALS	225	178	79%	215	144	67%	257	130	51%	

Certification Types- General (G), Subspecialty (S)
No Candidates

Harbor-UCLA Medical Center

		2003			2004		2005			INITIAL
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Anesthesiology (G)	5	3	60%	4	1	25%	5	3	60%	12 Years
Emergency Medicine (G)	14	14	100%	13	13	100%	13	6	46%	No Limit
Family Medicine (G)	12	12	100%	12	12	100%	12	12.	100%_	No Limit
Sports Medicine (S)			,				2	0	. 0%	
Internal Medicine (G)	16	16	100%	16	16	100%	18	17	94%	No Limit
Cardiology (S)							7	6	86%	
Endocrinology (S)							2	2	100%	
Gastroenterology (S)	1	1	100%	3	3	100%	1	1	100%	
Infectious Disease (S)				1	1	100%	2	1	50%	
Intervent Cardiology (S)		• :	- 1				1	1	100%_	
Nephrology (S)				1	1	100%				
Oncology/Hematology (S)	·						3	3	100%	
Pulmonary Disease (S)							2	2	100%	
Rheumatology (S)	1	1	100%	1	ı	100%	1	0	0%	
Medical Genetics (G)	1	1	100%				1	ī	100%	No Limit
Neurology (G)	4	4	100%	4	4	100%	2	0	0%	No Limit
Neurophysiology (S)							2	0	0%	
Obstetrics & Gynecology (G)	5	2	40%	5	0	0%	5	0	0%	No Limit
Gynecologic Urology (S)	1	1	100%	1	0	0%			-	
Maternal-Fetal Medicine (S)	1	0	0%		1.5		1	0	0%	
Orthopedic Surgery (G)	4	2	50%	4	1	25%	3	0	0%	No Limit
Foot and Ankle (S)							1	0	0%	
Pathology (G)	2	0	0%	4	4	100%	2	1	50%	5 Years
Surgical Pathology (S)					11.11	I	2	0	0%	
Pediatrics (G)	10	10	100%	10	9	90%	10	6	60%	No Limit
Emergency Peds (S)							2	0	0%	
Neonatology (S)				2	0	0%	2	0	0%	
Peds Critical Care (S)	2	2	100%				2	0	0%	
Psychiatry (G)	6	5.	83%	6	2	33%	6	0	0%	No Limit
Child/Adolescent Psychiatry (S)	1	1	100%	1	1	100%	2	0	0%	
Radiology (G)	5	5	100%	5	5	100%	5	5	100%	No Limit
Interventional Radiology (S)			6.60	ı	0	0%		1.		
Neuroradiology (S)	1	ī	100%				1	0	0%	
Surgery (G)	4	4	100%	3	3	100%	4	3	75%	3 Years
TOTALS	96	85	89%	97	77	79%	120	70	58%	· -

Certification Types- General (G), Subspecialty (S)
No Candidates

Ting/Drew Medical Center

		2003		2004			2005			INITIAL
PROGRAM	Number of Candidates		% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Anesthesiology (G)	4	2	50%	4	3	75%	6	2	33%	12 Years
Dermatology (G)	2	1	50%	2	2	100%	2	2	100%	No Limit
Emergency Medicine (G)	13	11	85%	13	12	92%	11	4	36%	No Limit
Family Medicine (G)	6	5	83%	8	7	87%	7	7	100%	No Limit
Internal Medicine (G)	13	11	85%	13	11	85%	13	13	100%	No Limit
Endocrinology (S)	1 1	11	100%	2	2	100%	3	3	100%	
Gastroenterology (S)				1	0	0%	2	2	100%_	
Geriatric Medicine (S)	3	1	33%				5	0	0%	
Infectious Disease (S)	2	1	50%	2	1	50%	1	1	100%	
Nephrology (S)	2	ı	50%						<u> </u>	
Obstetrics & Gynecology (G)	4	1	25%	2	0	0%	4	0	0%	No Limit_
Ophthalmology (G)	2	1	50%	2	1	50%	1	0	0%	No Limit
Orthopedic Surgery (G)	2	0	0%	2	0	0%	4	Ö	0%	No Limit
Otolaryngology (G)	2	2	100%		1.00		2	2	100%	No Limit
Pediatrics (G)	12	6	50%	12	4	33%	14	4	29%	No Limit
Psychiatry (G)	3	1	33%	6	0	0%	4	0	0%	No Limit
Radiology (G)	4	1	25%	5	4	80%	Dunger	me Withda	2100	No Limit
Surgery (G)	8	5	62%	6	4	67%	Programs Withdrawn			3 Years
TOTALS	83	51	61%	80	51	64%	79	40	51%	

Olive View-UCLA Medical Center

		2003			2004			2005	INITIAL	
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Internal Medicine (G)	18	16	89%	20	19	95%	19	16	84%_	No Limit
Hematology & Med Onc (S)	1	1	100%_	4	4	100%	1	1	100%	
Int Med & Emer Med (S)			1,1	2	2	100%	1	11	100%	
Nephrology (S)				2	2	100%	2	0	0%_	
Rheumatology (S)	1	ī	100%	1	1	100%	1	1	100%	
TOTALS	20	18	90%	29	28	97%	24	19	79%	

NOTE

Certification results in the following specialties reflect little change due to additional time required to complete the certification process:

- 1. **Obstetrics and Gynecology** candidates, after passing the qualifying written exam, must provide unsupervised patient care for at least 12 months prior to admission to the certifying oral exam
- 2. **Orthopedic Surgery** candidates must first qualify by passing the written exam. There are two certifying exams. The candidate must pass the oral exam prior to admission to the clinical on-site exam
- 3. **Urology** candidates have two qualifying requirements. After passing the written exam, candidates must engage in a minimum of 18 months of urological patient care before qualifying to sit for the certifying oral exam

Los Angeles County Department of Health Services Audit of Compliance with Resident Supervision Guidelines DHS Policy Number 310.2

<u>Fiscal Year 2005-2006 Quarter 4 (April - June)</u> <u>Service-specific Audit Summary</u>

Nurses from the Department of Health Services' Quality Improvement Patient Safety Program (DHSQIPS) continue to audit each teaching hospital to abstract data on seventeen (17) inpatient indicators for patients discharged during the fourth quarter (April - June) of fiscal year 2005-06. The indicators cover the assessment of resident supervision during surgical procedures, supervision of residents caring for patients admitted to the wards and intensive care units, and supervision during non-surgical invasive procedures. All audit findings have been reviewed by each facility medical director.

Data was collected from a sampling of hospital discharges with focus on the following services:

Facility	Services
Harbor-UCLA	Ophthalmology Orthopedics
LAC+USC	Ophthalmology Orthopedics Renal
King/Drew	Orthopedics
Olive View-UCLA	General Surgery

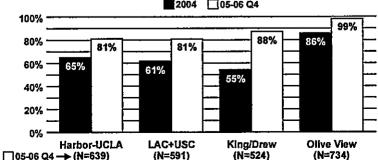
Sample sizing was based on the projected number of annual discharges per service. Using the service-specific format, not all facilities have medical records for ICU and/or invasive procedure sampling.

Findings

The compliance threshold is eighty percent (80%). System aggregates demonstrated improved compliance for the audited services at all facilities:

System Aggregates
Service-to-Service Comparison with 2004 and Q4 of 2005-06

■2004 □05-06 Q4



Findings (continued)

Although the findings reflect continued improvement for most indicators, opportunities for improvement continue to exist. The 80% threshold was not met for one ward indicator at three facilities and one ward indicator at two facilities:

Non-compliance with 80% Compliance Threshold

INDICATOR	H-UCLA	LAC+USC	KDMC	OVMC
Daily progress note indicates that it was signed, co-signed or discussed with attending every 48 hours	38%	61%	61%	
Documentation reflects that attending concurs with discharge plan	59%	55%		

Next Steps

Each facility that fails to meet the 80% threshold submits, to the facility governing body, a corrective action plan addressing each deficiency. In some instances serial re-audits have been conducted to more closely monitor the progress of a particular service.

Facilities that demonstrate best performance and/or a greater than fifteen percent (15%) improvement receive cash awards. These awards are released to the facility Quality Patient Care Fund or its equivalent to be used as described in the Committee of Interns and Residents' Memorandum of Understanding (if applicable) for the purchase of equipment for patient care.